## CAMPAIGN FINANCIAL DISCLOSURE REPORT SUMMARY PAGE

Rev. 5/11

(Please Print or Type)

14 FEB -6 PM 12: 55

Section I					***
Name of Candidate or Political Comm	illee and Chairperson		SE Spillage Soughi (if or	indidate) I A	District (if any)
Tocho Busine	and for	City and Zip	STATE OF Home Phone	IDATIO	Work Phone
Name of Political Treasurer	0781	Idoho Falls	83405		573-0800
Mailing Address	2ur	City and Zip	Home Phone		Work Phone
POBO BOG	, QQ	Idaho Falls	١,		628-5983
Change of address for:	Candidate or Political Comm				
-	Original				
This report is for the period from	•				
7 Day Pre-Primary Report 30 Day Post-Primary Report			ort		
☐ 7 Day Pre-General R	port				
Semi-Annual Report Is this a Termination Report:	(Statewide Candidates Only  Yes  N				
Section III Directions: If you had no cont Be s		F NO CONTRIBUTIONS ( tring this reporting period, ropriate "Calendar Year to	check the box next to the	statement I, Section l'	below and sign this report V.
🔼 I hereby certi	fy that I have received no co	ontribulions and have made	no expenditures during	this reporti	ng period.
Section IV		SUMMARY			
To reach your Calendar Year to figures to the Column II figures			COLUMN I This Period		COLUMN II Calendar Year to Date
Line 1: Cash on Hand January	1, This Calendar Year*		\$_XXXXXX	\$_	532.97
Line 2: Enter Beginning Cash Balance**			\$	\$_	XXXXXX
Line 3: Total Contributions (Enter amount from line 5, page 2)			\$	\$_	
Line 4: Subtotal (Add lines 1, 2 and 3)			\$	\$_	
Line 5: Total Expenditures (Enter amount from line 11, page 2)			\$	\$_	
Line 6: Enter Ending Cash Balance (Subtract line 5 from line 4)			\$	\$_	532.91
Line 7: Outstanding Debt to Date (Enter amount from line 18, page 2)			\$		
*This same ligure should be en **This is the figure on line 6 of t Note: The closing cash balance	he last Campaign Financial	Disclosure Report filed. If			
	Section V	.,			
Return This Report To: Ben Ysursa Secretary of State PO Box 83720 Boise ID 83720-0080 Phone: (208) 334-2852	report is a true, o	Name of Political Treasurer complete and correct Camp	•	•	nformation in this required by law.
Fax: (208) 334-2282		( V) cul	L		